

# COMBINATION DECLARATION & POWER OF ATTORNEY

As a below named inventor, I hereby declare that:

My residence, post office address and citizenship are as stated below next to my name,

I believe I am the original, first and sole inventor of the subject matter which is claimed and for which a patent is sought on the invention entitled

## Identification of Agonistic Autoantibodies

The specification of which was filed on November 28, 2003 as PCT International Application No. PCT/DE2003/003988.

I hereby state that I have reviewed and understand the contents of the above identified specification, including the claims, as amended by any amendment referred to above.

I acknowledge the duty to disclose information which is material to the examination of this application in accordance with Title 37, Code of Federal Regulations §1.56(a).

I hereby claim foreign priority benefits under Title 35, United States Code, §119 of any foreign application(s) for patent or inventor's certificate listed below and have also identified below any foreign application for patent or inventor's certificate having a filing date before that of the application on which priority is claimed:

Prior Foreign Application(s)			Priority Claimed	
<u>102 56 897.2</u> (Number)	<u>Germany</u> (Country)	<u>29 November 2002</u> (Day/Month/Yr. Filed)	<input checked="" type="checkbox"/> yes	<input type="checkbox"/> no
<u>103 03 120.0</u> (Number)	<u>Germany</u> (Country)	<u>27 January 2003</u> (Day/Month/Yr. Filed)	<input checked="" type="checkbox"/> yes	<input type="checkbox"/> no
<u>103 27 066.3</u> (Number)	<u>Germany</u> (Country)	<u>13 June 2003</u> (Day/Month/Yr. Filed)	<input checked="" type="checkbox"/> yes	<input type="checkbox"/> no

I hereby claim the benefit under 35 U.S.C. § 119(e) of any United States Provisional Application(s) listed below.

\_\_\_\_\_  
(Application Serial No.)

\_\_\_\_\_  
(Filing Date)

<u>(Application Serial No.)</u>	<u>(Filing Date)</u>	<u>(Status)</u> (patented, pending, abandoned)
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**POWER OF ATTORNEY:** As a named inventor, I hereby appoint

**Practitioners Associated with the Customer Number:**

27387

The undersigned hereby authorizes the U.S. attorney or agent named herein to accept and follow instructions from the Assignee of this application as to any action to be taken in the United States Patent and Trademark Office regarding this application without direct communication between the U.S. attorney or agent and the undersigned.

**Bruce S. Londa** (212) 808-0700

POST OFFICE ADDRESS: Same as above